

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition																														
Name of Debtor (if individual, enter Last, First, Middle): Augustine, Michael J.	Name of Joint Debtor (Spouse) (Last, First, Middle): Augustine, Wendi I.																															
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																															
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 9289	Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 8775																															
Street Address of Debtor (No. & Street, City, State & Zip Code): 800 S. Cedarcrest Dr. Schaumburg, IL	Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 800 S. Cedarcrest Dr. Schaumburg, IL																															
ZIPCODE 60193	ZIPCODE 60193																															
County of Residence or of the Principal Place of Business: Cook	County of Residence or of the Principal Place of Business: Cook																															
Mailing Address of Debtor (if different from street address)	Mailing Address of Joint Debtor (if different from street address):																															
ZIPCODE	ZIPCODE																															
Location of Principal Assets of Business Debtor (if different from street address above):																																
Type of Debtor (Form of Organization) (Check one box.)	Nature of Business (Check one box.)	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)																														
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13																														
	Tax-Exempt Entity (Check box, if applicable.)	<input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding																														
	<input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box)																														
		<input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.																														
Filing Fee (Check one box)		Chapter 11 Debtors:																														
<input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																														
Statistical/Administrative Information																																
<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																																
THIS SPACE IS FOR COURT USE ONLY																																
Estimated Number of Creditors <table border="1"> <tr> <td>1-</td> <td>50-</td> <td>100-</td> <td>200-</td> <td>1,000-</td> <td>5,001-</td> <td>10,001-</td> <td>25,001-</td> <td>50,001-</td> <td>Over</td> </tr> <tr> <td>49</td> <td>99</td> <td>199</td> <td>999</td> <td>5,000</td> <td>10,000</td> <td>25,000</td> <td>50,000</td> <td>100,000</td> <td>100,000</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			1-	50-	100-	200-	1,000-	5,001-	10,001-	25,001-	50,001-	Over	49	99	199	999	5,000	10,000	25,000	50,000	100,000	100,000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>						
1-	50-	100-	200-	1,000-	5,001-	10,001-	25,001-	50,001-	Over																							
49	99	199	999	5,000	10,000	25,000	50,000	100,000	100,000																							
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																							
Estimated Assets <table border="1"> <tr> <td><input type="checkbox"/> \$0 to \$10,000</td> <td><input type="checkbox"/> \$10,000 to \$100,000</td> <td><input checked="" type="checkbox"/> \$100,000 to \$1 million</td> <td><input type="checkbox"/> \$1 million to \$100 million</td> <td><input type="checkbox"/> More than \$100 million</td> </tr> </table>			<input type="checkbox"/> \$0 to \$10,000	<input type="checkbox"/> \$10,000 to \$100,000	<input checked="" type="checkbox"/> \$100,000 to \$1 million	<input type="checkbox"/> \$1 million to \$100 million	<input type="checkbox"/> More than \$100 million																									
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Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Augustine, Michael J. & Augustine, Wendi I.
Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet)		
Location Where Filed: Northern District Of Illinois	Case Number: 99-33854	Date Filed: 11/02/1999
Location Where Filed: N/A	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		X /s/ Kenneth J. Chapman Signature of Attorney for Debtor(s)
		7/17/07
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue (Check any applicable box.) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) _____ (Name of landlord or lessor that obtained judgment) _____ (Address of landlord or lessor) <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): Augustine, Michael J. & Augustine, Wendi I.
Signatures	
Signature(s) of Debtor(s) (Individual/Joint) <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ Michael J. Augustine Signature of Debtor Michael J. Augustine</p> <p>X /s/ Wendi I. Augustine Signature of Joint Debtor Wendi I. Augustine</p> <p>Telephone Number (If not represented by attorney)</p> <p>July 17, 2007 Date</p>	Signature of a Foreign Representative <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X Signature of Foreign Representative</p> <p>X Printed Name of Foreign Representative</p> <p>Date</p>
Signature of Attorney <p>X /s/ Kenneth J. Chapman Signature of Attorney for Debtor(s) Kenneth J. Chapman 6284537 Printed Name of Attorney for Debtor(s)</p> <p>Law Office Of Kenneth J. Chapman Firm Name</p> <p>1901 N. Roselle Rd., Suite 800 Address</p> <p>Schaumburg, IL 60195</p> <p>(800) 741-1504 Telephone Number</p> <p>July 17, 2007 Date</p>	Signature of Non-Attorney Petition Preparer <p>I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.</p> <p>Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>Address</p> <p>X Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.</p> <p>Date</p> <p>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>
VOLUNTARY PETITION	

IN RE:

Augustine, Michael J. & Augustine, Wendi I.

Debtor(s)

Case No. _____

Chapter 13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 252,000.00		
B - Personal Property	Yes	3	\$ 13,244.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 214,915.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	15		\$ 78,532.82	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 3,186.18
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,759.18
TOTAL		26	\$ 265,244.00	\$ 293,447.82	

IN RE:

Augustine, Michael J. & Augustine, Wendi I.

Debtor(s)

Case No. _____

Chapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 3,186.18
Average Expenses (from Schedule J, Line 18)	\$ 2,759.18
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 1,654.81

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ 0.00
4. Total from Schedule F	\$ 78,532.82
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ 78,532.82

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint or "C" for Community in the column labeled "HWJC." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
800 S. Cedarcrest Dr. Schaumburg, IL 60193 Deed of Trust Note Alaska Property		J	244,000.00	214,915.00
		J	8,000.00	0.00
				TOTAL 252,000.00

(Report also on Summary of Schedules)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash	J	20.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	Savings Account - National City Bank	J	9.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Misc. Household Items - No One Item Exceeds \$500.00	J	2,000.00
4. Household goods and furnishings, include audio, video, and computer equipment.		Books & Pictures	J	150.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Clothing	J	400.00
6. Wearing apparel.	X	Misc. Jewelry	J	1,500.00
7. Furs and jewelry.				
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(3). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		Augustine Marketing & Management	J	5.00
14. Interests in partnerships or joint ventures. Itemize.	X	No Assets		
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) in customer lists or similar compilations provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1955 Sears Row Boat & Trailer 1989 Lincoln Mark 7 (89,000 miles) 1993 Georgie Boy Motor Home (44,000 miles)	H H H	300.00 860.00 8,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
35. Other personal property of any kind not already listed. Itemize.	X			
				TOTAL 13,244.00

Debtor(s)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<u>SCHEDULE A - REAL PROPERTY</u>			
800 S. Cedarcrest Dr. Schaumburg, IL 60193	735 ILCS 5 §12-901	29,085.00	244,000.00
Deed of Trust Note Alaska Property	735 ILCS 5 §12-1001(b)	106.00	8,000.00
<u>SCHEDULE B - PERSONAL PROPERTY</u>			
Cash	735 ILCS 5 §12-1001(b)	20.00	20.00
Savings Account - National City Bank	735 ILCS 5 §12-1001(b)	9.00	9.00
Misc. Household Items - No One Item Exceeds \$500.00	735 ILCS 5 §12-1001(b)	2,000.00	2,000.00
Books & Pictures	735 ILCS 5 §12-1001(a)	150.00	150.00
Clothing	735 ILCS 5 §12-1001(a)	400.00	400.00
Misc. Jewelry	735 ILCS 5 §12-1001(b)	1,500.00	1,500.00
Augustine Marketing & Management No Assets	735 ILCS 5 §12-1001(b)	5.00	5.00
1955 Sears Row Boat & Trailer	735 ILCS 5 §12-1001(b)	300.00	300.00
1989 Lincole Mark 7 (89,000 miles)	735 ILCS 5 §12-1001(c)	860.00	860.00
1993 Georgie Boy Motor Home (44,000 miles)	735 ILCS 5 §12-1001(c) 735 ILCS 5 §12-1001(b)	3,940.00 4,060.00	8,000.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY		
				CONTINGENT	UNLIQUIDATED	DISPUTED			
ACCOUNT NO. 1115040195 America's Servicing Company PO Box 1820 Newark, NJ 07101-1820	J		Mortgage				214,915.00		
			VALUE \$ 244,000.00						
ACCOUNT NO. 14-07-8883 Codilis & Associates, PC 15 W 030 N. Frontage Rd, Suite 100 Burr Ridge, IL 60527	J		Notice Only - Attorney Mortgage Foreclosure Summons				0.00		
			VALUE \$ 244,000.00						
ACCOUNT NO.									
			VALUE \$						
ACCOUNT NO.									
			VALUE \$						
Subtotal (Total of this page)				\$ 214,915.00	\$				
Total (Use only on last page of the completed Schedule D. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)				\$ 214,915.00	\$				

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3542-1099031 A.T.D. Yellow Pages PO Box 3110 Jersey City, NJ 07303-3110	H	Advertising				297.00
ACCOUNT NO. 6088 Aasoc. For Oral Maxillofacial And Implant Surgery 112 North Oak Ave. Bartlett, IL 60103	W	Medical				30.00
ACCOUNT NO. 801424 ACC International ACC BLDG 919 Estes Court Schaumburg, IL 60193-4427	W	Collection - Partners in Primary				106.58
ACCOUNT NO. 205721 Alex Bros Outpatient Group Practice 21272 Network Place Chicago, IL 60673-1212	W	Medical				329.00
Subtotal (Total of this page)						\$ 762.58
Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$

14 continuation sheets attached

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 205721 Alexian Brothers Behavioral Health 21272 Network Place Chicago, IL 60673-1212	W	Medical			
					272.00
ACCOUNT NO. 00185719 Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673-1225	H	Notice Only - Sent To Malcolm S. Gerald & Associates For Collection			
					0.00
ACCOUNT NO. G00701110504 Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673-1225	H	Medical			
					12,075.95
ACCOUNT NO. A0522400224 Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673-1225	W	Medical			
					100.00
ACCOUNT NO. A0607601047 Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673-1225	W	Sent To Illinois Collection Service For Collection			
					0.00
ACCOUNT NO. A0602400999 Alexian Brothers Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673-1225	W	Sent To Harris & Harris LTD For Collection			
					0.00
ACCOUNT NO. Argent Healthcare Financial Services PO Box 667 1900 W. Severs Road LaPorte, IN 46352	H	Medical			
					458.65
Sheet no. 1 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 12,906.60	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 9773 Arvind Patel, MDSC 1460 Market St., #300 Des Plaines, IL 60016	W	Medical			524.00
ACCOUNT NO. 0090443 Behavioral Healthcare Associates 1375 E. Scahumburg Rd., Suite 260 Scahumburg, IL 60194-3658		Medical			42.00
ACCOUNT NO. 5291-0716-3756-1612 Capital One PO Box 26030 Richmond, VA 23260-6030	H	Credit Line			1,590.00
ACCOUNT NO. 5178-0524-2537-8078 Capital One PO Box 26030 Richmond, VA 23260-6030		Credit Line			812.00
ACCOUNT NO. 02401414 Chase Receivables 1247 Broadway Sonoma, CA 95476	H	Collection - Target National Bank			240.52
ACCOUNT NO. 416678018 Commonwealth Edison Bill Payment Center Chicago, IL 60668-0002		Utility			522.54
ACCOUNT NO. 601796 Creditor Alliance Inc. PO Box 1288 Bloomington, IL 61702-1288	H	Collection - Dr. M S Kohli			105.00
Sheet no. 2 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 3,836.06	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. C12299C6395 Diversified Servicing Inc. PO Box 80185 Phoenix, AZ 85060-0185	H	Collection - MED102 Urological			514.00
ACCOUNT NO. 12-53350 DuPage Internal Medicine, LLC 350 W. Kensington Rd., Suite 115 Mt. Prospect, IL 60056	W	Medical			451.71
ACCOUNT NO. Elk Grove Lab Physicians PC Dept 77-9154 Chicago, IL 60678-0001	W	Notice Only - Sent To Harvard Collection For Collection			0.00
ACCOUNT NO. 67-7347018 Elk Grove Radiology SC 75 Remittance Dr., Suite 6500 Chicago, IL 60675-6500	H	Notice Only - Sent To Illinois Collection Services For Collection			0.00
ACCOUNT NO. 67-7012894 Elk Grove Radiology SC 75 Remittance Dr., Suite 6500 Chicago, IL 60675-6500	W	Notice Only - Sent To Illinois Collection services For Collection			0.00
ACCOUNT NO. G00532400139 Harris & Harris LTD 600 W Jackson, Suite 400 Chicago, IL 60661	H	Collection - Alexian Brothers Medical Center			840.00
ACCOUNT NO. F013799903 Harris & Harris LTD 600 W Jackson, Suite 400 Chicago, IL 60661	W	Collection - St. Alexius Medical Center			560.00
Sheet no. 3 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 2,365.71	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. G00602400999		W Collection - Alexian Brothers Medical Center			1,520.80
Harris & Harris LTD 600 W Jackson, Suite 400 Chicago, IL 60661					
ACCOUNT NO. 9743079		H Collection - Elk Grove Lab			205.00
Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534					
ACCOUNT NO. 9203111		H Collection - Elk Grove Lab			289.00
Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534					
ACCOUNT NO. 9346198		H Collection - Elk Grove Lab			105.00
Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534					
ACCOUNT NO. 8679914		H Collection - Elk Grove Lab			517.00
Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534					
ACCOUNT NO. 10093141		W Collection - Schaumburg Fire Department			457.00
Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534					
ACCOUNT NO. 10125082		W Collection - Elk Grove Lab Physician			305.90
Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534					
Sheet no. 4 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 3,399.70	
Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 126190 Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534	W	Collection - Schaumburg Fire Department			63.25
ACCOUNT NO. 10092609 Harvard Collection Service 4839 N. Elston Ave. Chicago, IL 60630-2534	W	Collection - Elk Grove Lab Physician			3,351.45
ACCOUNT NO. 2610 Hashemi Medical Group SC 4 Executive Ct., Suite 3 South Barrington, IL 60010-9519	W	Medical			30.00
ACCOUNT NO. 2582 Hashemi Medical Group SC 4 Executive Ct., Suite 3 South Barrington, IL 60010-9519	W	Notice Only - Sent To I. C. Systems For Collection			0.00
ACCOUNT NO. 5488-9750-0677-5632 HSBC - NV PO Box 19360 Portland, OR 97280-8706	H	Credit Line			782.00
ACCOUNT NO. 4240305022 I. C. Systems Collections PO Box 64378 St. Paul, MN 55164-0378	H	Collection - Hashemi Medical - Sent To Thomas E. Jolas, PC			0.00
ACCOUNT NO. 4232339322 I. C. Systems Collections PO Box 64378 St. Paul, MN 55164-0378	H	Collection - Robert J. Cinefro MD			187.00
Sheet no. 5 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 4,413.70	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 6877254 Illinois Collection Services, Inc. 3101 W. 95th St. FL Evergreen Park, IL 60805-2406	H	Collection - Alexian Brothers			87.00
ACCOUNT NO. 4909075 Illinois Collection Services, Inc. 3101 W. 95th St. FL Evergreen Park, IL 60805-2406	H	Collection - Alexian Brothers			94.00
ACCOUNT NO. 5295930 Illinois Collection Services, Inc. 3101 W. 95th St. FL Evergreen Park, IL 60805-2406	H	Collection - Alexian Brothers			141.00
ACCOUNT NO. 6877133 Illinois Collection Services, Inc. 3101 W. 95th St. FL Evergreen Park, IL 60805-2406	H	Collection - Alexian Brothers			415.00
ACCOUNT NO. 7851230 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	H	Collection Alexian Brothers			2,287.50
ACCOUNT NO. 9439726 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			187.00
ACCOUNT NO. 9439723 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			140.00
Sheet no. 6 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 3,351.50	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. 9439725 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			140.00
ACCOUNT NO. 9439724 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			375.00
ACCOUNT NO. 9439722 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			134.00
ACCOUNT NO. 9439721 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			90.00
ACCOUNT NO. 8345655 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Elk Grove Radiology			1,097.00
ACCOUNT NO. 5443460 Illinois Collection Services, Inc. PO Box 646 Oak Lawn, IL 60454-0646	W	Collection - Bonaventure Medical Foundation			196.00
ACCOUNT NO. 0002396480000836305 IPC Of Illinois PO Box 92934 Los Angles, CA 90009	W	Collection - Medical			738.00
Sheet no. 7 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 2,770.00	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO.					
IPC Of Illinois PO Box 92934 Los Angles, CA 90009	W	Collection - Medical			67.62
ACCOUNT NO. G00532400139	H	Collection - Alexian Brothers Medical Center			840.00
Malcolm S. Gerald & Associates 332 S. Michigan Ave., Suite 600 Chicago, IL 60604					
ACCOUNT NO. G00524300236	H	Collection - Alexian Brothers Medical Center			1,094.48
Malcolm S. Gerald & Associates 332 S. Michigan Ave., Suite 600 Chicago, IL 60604					
ACCOUNT NO. G00602400999	W	Collection - Alexian Brother Medical Center			1,520.80
Malcolm S. Gerald & Associates 332 S. Michigan Ave., Suite 600 Chicago, IL 60604					
ACCOUNT NO. 430638	W	Collection - Alexius Medical Center			1,960.00
Malcolm S. Gerald & Associates 332 S. Michigan Ave., Suite 600 Chicago, IL 60604					
ACCOUNT NO. G00607601047	W	Collection - Alexian Bothers Medical Center			1,484.00
Malcolm S. Gerald & Associates 332 S. Michigan Ave., Suite 600 Chicago, IL 60604					
ACCOUNT NO. 205721	W	Collection - Abhhh OutPT Group Practice			100.00
Malcolm S. Gerald & Associates 332 S. Michigan Ave., Suite 600 Chicago, IL 60604					
Sheet no. 8 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 7,066.90	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 0017338 MEA Elk Grove LLC PO Box 5990 Dept 20-6008 Carol Stream, IL 60197-5990	H	Medical			739.00
ACCOUNT NO. 007-2396 MEA Elk Grove LLC PO Box 87904 Dept 2049 Carol Stream, IL 60188-7904	W	Medical			341.00
ACCOUNT NO. 001-67965 MEA Elk Grove LLC PO Box 87904 Dept 2049 Carol Stream, IL 60188-7904	W	Medical			496.00
ACCOUNT NO. 00150614 MEA-AEA LLC PO Box 366 Hinsdale, IL 60522	W	Medical			669.00
ACCOUNT NO. 173-3805 Medical Collections Systems, Inc 725 S. Wells St., Suite 700 Chicago, IL 60607	H	Collection - Radiology Imaging Consultants			356.00
ACCOUNT NO. 185-1036 Medical Collections Systems, Inc 725 S. Wells St., Suite 500 Chicago, IL 60607	H	Collection - Northwest Gastroenterologists			169.54
ACCOUNT NO. Nalinaksha V. Joshi, MD 1004 S. NA-WA-TA Aven Mt. Prospect, IL 60056	W	Medical			530.00
Sheet no. 9 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 3,300.54	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 665645701 NCO Financial Systems PO Box 41466 Philadelphia, PA 19101	H	Collection - Progressive Insurance			67.00
ACCOUNT NO. 000239648000836303 NCO Financial Systems 2360 Campell Creek, Suite 500 Richardson, TX 75082	W	Collection - IPC The Hospitalists			393.00
ACCOUNT NO. 34966-20050829-99223 NCO Financial Systems 2360 Campell Creek, Suite 500 Richardson, TX 75082	W	Collection - IPC The Hospitalists			32.09
ACCOUNT NO. 000239648000836305 NCO Financial Systems 2360 Campell Creek, Suite 500 Richardson, TX 75082	W	Collection - IPC The Hospitalists			144.00
ACCOUNT NO. 0002396448000836304 NCO Financial Systems 2360 Campell Creek, Suite 500 Richardson, TX 75082	W	Collection - IPC The Hospitalists			201.00
ACCOUNT NO. 72ECU8 NCO Financial Systems 507 Prudential Rd. Horsham, PA 19044	W	Collection - Circuit Court Clerk Kane Co.			270.00
ACCOUNT NO. 30076158 Nco Financial Systems - Dallas PO Box 15393 Wilmington, DE 19850	H	Collection - IPC The Hospitalists			765.00
Sheet no. 10 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 1,872.09	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 30076167 Nco Financial Systems - Dallas PO Box 15393 Wilmington, DE 19850	H	Collection - IPC The Hospitalists			171.00
ACCOUNT NO. 086-1-0001934486 NeoPath, SC 520 E. 22nd St. Lombard, IL 60148	W	Medical			209.00
ACCOUNT NO. 086-1-0001932147 NeoPath, SC 520 E. 22nd St. Lombard, IL 60148	W	Medical			227.00
ACCOUNT NO. 51-01-46-0000-4 Nicor Gas PO Box 416 Aurora, IL 60568-0001	H	Utility			469.00
ACCOUNT NO. 9289MAUG Northwest Gastroenterologists 1415 S. Arlington Heights Arlington Heights, IL 60005-3100	H	Notice Only - Medical Sent To Medical Collection Systems For Collection			0.00
ACCOUNT NO. 8775WAUG Northwest Gastroenterologists 1415 S. Arlington Heights Arlington Heights, IL 60005-3100	W	Medical			6.16
ACCOUNT NO. 107725 Northwest Health Care Association 2360 Hassell Rd., Suite F Hoffman Estates, IL 60169-2171	W	Medical			450.00
Sheet no. 11 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 1,532.16	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 50877 Northwest Neurology, LTD 2260 W. Higgins Rd., Suite 201 Hoffman Estates, IL 60169-2433	W	Medical			125.00
ACCOUNT NO. 5622758 OSI Collection Services PO Box 959 Brookfield, WI 53008-0959		Collection - Elk Grove Cardiology			28.00
ACCOUNT NO. 217851 Partners In Primary Care PO Box 8355 Rolling Meadows, IL 60008	H	Medical			53.71
ACCOUNT NO. 216003 Partners In Primary Care PO Box 8355 Rolling Meadows, IL 60008		Notice Only - Sent To Collection			0.00
ACCOUNT NO. A0416600872 Pellettieri & Associates, LTD 991 Oak Creek Dr. Lombard, IL 60148	W	Collection Alexian Brothers Medical Center			100.00
ACCOUNT NO. A0414501010 Pellettieri & Associates, LTD 991 Oak Creek Dr. Lombard, IL 60148		Collection - Alexian Brothers Medical Center			300.00
ACCOUNT NO. 126190 Schaumburg Fire Department PO Box 457 Wheeling, IL 60090	W	Sent to Harvard Collection Services For Collection			0.00
Sheet no. <u>12</u> of <u>14</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)	\$ 606.71		
		Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO. 369207 Schaumburg Fire Department PO Box 457 Wheeling, IL 60090	W	Sent To Harvard Collection For Collection			0.00
ACCOUNT NO. F00021619523 St Alexius Medical Center 21219 Network Place Chicago, IL 60673-1212	W	Medical			1,396.55
ACCOUNT NO. F013296595 St Alexius Medical Center 21219 Network Place Chicago, IL 60673-1212	W	Medical			1,400.00
ACCOUNT NO. F00021030986 St Alexius Medical Center 21219 Network Place Chicago, IL 60673-1212	W	Medical			16,661.70
ACCOUNT NO. F00021666169 St. Alexius Medical Center 21219 Network Place Chciago, IL 60673-1212	W	Medical - Sent To Malcolm S. gerald & Associates For Collection			0.00
ACCOUNT NO. F00021030986 St. Alexius Medical Center 21219 Network Place Chciago, IL 60673-1212	W	Medical			9,801.00
ACCOUNT NO. 4873571 State Collection Service PO Box 6250 Masison, WI 53701	H	Collection - MEA Elk Grove Village			220.00
Sheet no. 13 of 14 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ 29,479.25	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCOUNT NO.					
Thomas E. Jolas, PC PO Box 4000 202 First Street NW Mason City, IA 50401	H	Collection - Hashemi Medical Group			326.00
ACCOUNT NO. A5900014					
United Healthcare Insurance Co. Greensboro SM GRP PO Box 740800 Atlanta, GA 30374-3210	H	Medical			248.64
ACCOUNT NO. A590002M					
United Healthcare Insurance Co. Greensboro SM GRP PO Box 740800 Atlanta, GA 30374-3210	H	Medical			83.26
ACCOUNT NO. 314678					
University Of Illinois At Chicago Physician Group 135 S. LaSalle St., Box 3293 Chicago, IL 60674-3293	W	Medical			125.00
ACCOUNT NO. AUGWE000					
Utpal Paul Parekh, MD 303 W. Lake St., Suite 205 Addison, IL 60101	W	Medical			86.42
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <u>14</u> of <u>14</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$	869.32
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	78,532.82

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation Senior Account Manager	Unemployed	
Name of Employer Virgin Atlantic Airways		
How long employed 3 Months		
Address of Employer 105 Division St., Suite 103		
Bensenville, IL 60106		

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly) \$ **3,750.00** \$ _____
2. Estimated monthly overtime \$ _____ \$ _____

3. SUBTOTAL

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and Social Security \$ **769.49** \$ _____
b. Insurance \$ **346.84** \$ _____
c. Union dues \$ _____ \$ _____
d. Other (specify) _____ \$ _____ \$ _____

5. SUBTOTAL OF PAYROLL DEDUCTIONS**6. TOTAL NET MONTHLY TAKE HOME PAY**

7. Regular income from operation of business or profession or farm (attach detailed statement) \$ _____ \$ _____

8. Income from real property \$ _____ \$ _____

9. Interest and dividends \$ _____ \$ _____

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ _____ \$ _____

11. Social Security or other government assistance (Specify) _____ \$ _____ \$ _____

12. Pension or retirement income \$ _____ \$ _____

13. Other monthly income (Specify) **Car Allowance** \$ **552.50** \$ _____
\$ _____ \$ _____

14. SUBTOTAL OF LINES 7 THROUGH 13**15. AVERAGE MONTHLY INCOME** (Add amounts shown on lines 6 and 14)

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15) \$ **3,186.17** \$ **0.00**

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 1,999.96
a. Are real estate taxes included? Yes <input checked="" type="checkbox"/> No _____	
b. Is property insurance included? Yes <input checked="" type="checkbox"/> No _____	
2. Utilities:	
a. Electricity and heating fuel	\$ 150.00
b. Water and sewer	\$ 33.04
c. Telephone	\$ 40.18
d. Other _____	\$ _____
3. Home maintenance (repairs and upkeep)	\$ _____
4. Food	\$ 300.00
5. Clothing	\$ 50.00
6. Laundry and dry cleaning	\$ _____
7. Medical and dental expenses	\$ _____
8. Transportation (not including car payments)	\$ 50.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 50.00
10. Charitable contributions	\$ _____
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ _____
b. Life	\$ _____
c. Health	\$ _____
d. Auto	\$ 86.00
e. Other _____	\$ _____
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) _____	\$ _____
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ _____
b. Other _____	\$ _____
14. Alimony, maintenance, and support paid to others	\$ _____
15. Payments for support of additional dependents not living at your home	\$ _____
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ _____
17. Other _____	\$ _____

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 2,759.18

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:
None

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$ 3,186.18
b. Average monthly expenses from Line 18 above	\$ 2,759.18
c. Monthly net income (a. minus b.)	\$ 427.00

DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 28 sheets (*total shown on summary page plus 2*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: July 17, 2007Signature: /s/ Michael J. Augustine
Michael J. Augustine

Debtor

Date: July 17, 2007Signature: /s/ Wendi I. Augustine
Wendi I. Augustine

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

IN RE:

Augustine, Michael J. & Augustine, Wendi I.

Debtor(s)

Case No. _____

Chapter **13**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
63,213.00	2005 Gross Income
17,728.00	2006 Gross Income
9,928.86	2007 Gross Income (YTD)

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE
Law Office Of Kenneth J. Chapman
1901 N. Roselle Rd., Suite 800
Schaumburg, IL 60195

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
	\$2400.00 Chapter 13 Plan

10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: July 17, 2007

Signature /s/ Michael J. Augustine
of Debtor

Michael J. Augustine

Date: July 17, 2007

Signature /s/ Wendi I. Augustine
of Joint Debtor
(if any)

Wendi I. Augustine

_____ **0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Augustine, Michael J. & Augustine, Wendi I.

Printed Name(s) of Debtor(s)

X /s/ Michael J. Augustine

Signature of Debtor

7/17/2007

Date

Case No. (if known) _____

X /s/ Wendi I. Augustine

Signature of Joint Debtor (if any)

7/17/2007

Date

IN RE:

Augustine, Wendi I.

Debtor(s)

Case No. _____

Chapter 13

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Wendi I. Augustine

Date: July 17, 2007

IN RE:

Augustine, Michael J.

Debtor(s)

Case No. _____

Chapter 13

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

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3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Michael J. Augustine

Date: July 17, 2007

IN RE:

Augustine, Michael J. & Augustine, Wendi I.

Debtor(s)

Case No. _____

Chapter 13

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ **2,400.00**

Prior to the filing of this statement I have received \$ _____

Balance Due \$ **2,400.00**

2. The source of the compensation paid to me was: Debtor Other (specify): _____
3. The source of compensation to be paid to me is: Debtor Other (specify): _____
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. **Representation of the debtor in adversary proceedings and other contested bankruptcy matters;**
 - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:
Representation of the debtor(s) in adversary proceedings and other contested bankruptcy matters. Please see Fee/Retainer Agreement for scope of representation.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 17, 2007

Date

/s/ Kenneth J. Chapman

Signature of Attorney

Law Office Of Kenneth J. Chapman

Name of Law Firm

IN RE:

Augustine, Michael J. & Augustine, Wendi I.

Debtor(s)

Case No. _____

Chapter 13

VERIFICATION OF CREDITOR MATRIX

Number of Creditors 54

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: July 17, 2007

/s/ Michael J. Augustine

Debtor

/s/ Wendi I. Augustine

Joint Debtor

Augustine, Michael J.
800 S. Cedarcrest Dr.
Schaumburg, IL 60193

Document Page 43 of 44
Argent Healthcare Financial Services
PO Box 667
1900 W. Severs Road
LaPorte, IN 46352

Elk Grove Lab Physicians PC
Dept 77-9154
Chicago, IL 60678-0001

Augustine, Wendi I.
800 S. Cedarcrest Dr.
Schaumburg, IL 60193

Arvind Patel, MDSC
1460 Market St., #300
Des Plaines, IL 60016

Elk Grove Radiology SC
75 Remittance Dr., Suite 6500
Chicago, IL 60675-6500

Law Office Of Kenneth J. Chapman
1901 N. Roselle Rd., Suite 800
Schaumburg, IL 60195

Behavioral Healthcare Associates
1375 E. Schaumburg Rd., Suite 260
Schaumburg, IL 60194-3658

Harris & Harris LTD
600 W Jackson, Suite 400
Chicago, IL 60661

A.T.D.
Yellow Pages
PO Box 3110
Jersey City, NJ 07303-3110

Capital One
PO Box 26030
Richmond, VA 23260-6030

Harvard Collection Service
4839 N. Elston Ave.
Chicago, IL 60630-2534

Aasoc. For Oral Maxillofacial
And Implant Surgery
112 North Oak Ave.
Bartlett, IL 60103

Chase Receivables
1247 Broadway
Sonoma, CA 95476

Hashemi Medical Group SC
4 Executive Ct., Suite 3
South Barrington, IL 60010-9519

ACC International
ACC BLDG
919 Estes Court
Schaumburg, IL 60193-4427

Codilis & Associates, PC
15 W 030 N. Frontage Rd, Suite 100
Burr Ridge, IL 60527

HSBC - NV
PO Box 19360
Portland, OR 97280-8706

Alex Bros Outpatient Group Practice
21272 Network Place
Chicago, IL 60673-1212

Commonwealth Edison
Bill Payment Center
Chicago, IL 60668-0002

I. C. Systems Collections
PO Box 64378
St. Paul, MN 55164-0378

Alexian Brothers Behavioral Health
21272 Network Place
Chicago, IL 60673-1212

Creditor Alliance Inc.
PO Box 1288
Bloomington, IL 61702-1288

Illinois Collection Services, Inc.
3101 W. 95th St. FL
Evergreen Park, IL 60805-2406

Alexian Brothers Medical Center
Lock Box 22589
22589 Network Place
Chicago, IL 60673-1225

Diversified Servicing Inc.
PO Box 80185
Phoenix, AZ 85060-0185

Illinois Collection Services, Inc.
PO Box 646
Oak Lawn, IL 60454-0646

America's Servicing Company
PO Box 1820
Newark, NJ 07101-1820

DuPage Internal Medicine, LLC
350 W. Kensington Rd., Suite 115
Mt. Prospect, IL 60056

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PO Box 92934
Los Angles, CA 90009

Document Page 44 of 44
NCO Financial Systems - Dallas
 PO Box 15393
 Wilmington, DE 19850

St Alexius Medical Center
 21219 Network Place
 Chicago, IL 60673-1212

Malcolm S. Gerald & Associates
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 Chicago, IL 60604

MEA Elk Grove LLC
 PO Box 5990 Dept 20-6008
 Carol Stream, IL 60197-5990

NeoPath, SC
 520 E. 22nd St.
 Lombard, IL 60148

St. Alexius Medical Center
 21219 Network Place
 Chciago, IL 60673-1212

MEA Elk Grove LLC
 PO Box 87904
 Dept 2049
 Carol Stream, IL 60188-7904

Nicor Gas
 PO Box 416
 Aurora, IL 60568-0001

State Collection Service
 PO Box 6250
 Masison, WI 53701

MEA-AEA LLC
 PO Box 366
 Hinsdale, IL 60522

Northwest Gastroenterologists
 1415 S. Arlington Heights
 Arlington Heights, IL 60005-3100

Thomas E. Jolas, PC
 PO Box 4000
 202 First Street NW
 Mason City, IA 50401

Medical Collections Systems, Inc
 725 S. Wells St., Suite 700
 Chicago, IL 60607

Northwest Health Care Association
 2360 Hassell Rd., Suite F
 Hoffman Estates, IL 60169-2171

United Healthcare Insurance Co.
 Greensboro SM GRP
 PO Box 740800
 Atlanta, GA 30374-3210

Medical Collections Systems, Inc
 725 S. Wells St., Suite 500
 Chicago, IL 60607

Northwest Neurology, LTD
 2260 W. Higgins Rd., Suite 201
 Hoffman Estates, IL 60169-2433

University Of Illinois At Chicago
 Physician Group
 135 S. LaSalle St., Box 3293
 Chicago, IL 60674-3293

Nalinaksha V. Joshi, MD
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 Mt. Prospect, IL 60056

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 Brookfield, WI 53008-0959

Utpal Paul Parekh, MD
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 Addison, IL 60101

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 PO Box 41466
 Philadelphia, PA 19101

Partners In Primary Care
 PO Box 8355
 Rolling Meadows, IL 60008

NCO Financial Systems
 2360 Campell Creek, Suite 500
 Richardson, TX 75082

Pellettieri & Associates, LTD
 991 Oak Creek Dr.
 Lombard, IL 60148

NCO Financial Systems
 507 Prudential Rd.
 Horsham, PA 19044

Scahumburg Fire Department
 PO Box 457
 Wheeling, IL 60090